

I urge my colleagues to join me in co-sponsoring H.R. 1154, introduced by AL GREEN of Texas.

WALTER REED

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New York (Mrs. MCCARTHY) is recognized for 5 minutes.

Mrs. MCCARTHY of New York. Mr. Speaker, I rise today to talk about the conditions that we have been hearing about on the care of our veterans at Walter Reed Outpatient Care.

Walter Reed is the first stop for many of our brave men and women returning from Iraq. These soldiers risked their lives defending this great Nation. They have lost friends in combat, and they have seen countless comrades lose limbs and suffer horrible wounds. They expect no reward in return for their bravery.

Unfortunately, the treatment they have received when entering the outpatient care is substandard. Conditions at Walter Reed Building 18, even though they are being improved today, should have never gotten to that condition.

We have all read reports on the matter; so I will not go into all of the details.

Mr. Speaker, if these conditions existed in the public, the authorities would have quickly been notified. However, the mismanagement of care does not end with Building 18. Many of our veterans are lost in the system once they are transferred to the outpatient care. Case files are being lost. Head trauma victims are not receiving the level of managed care they require. Non-English-speaking families are left to navigate through the red tape that exists at Walter Reed and, I am sure, many other veterans' hospitals.

The management at Walter Reed is directly responsible for these conditions, and I know those are changing now. But, again, we must make sure this does not happen again.

Congress has the ability to improve the situation for our new veterans. We are all aware of the benefits of health information technology. Health IT allows patients to move throughout the health care system in an easy manner. If Health IT was implemented at Walter Reed, our veterans would be able to move from inpatient to outpatient care without the fear that their records would be lost. The benefits our veterans would receive if health IT is implemented far outweigh the cost of the system.

Many of our Iraqi veterans are coming home with head injuries. Roadside bombs and IEDs are responsible for this increase. These veterans require constant care and supervision. Many of them have lost cognitive abilities. In some of the worst cases, veterans are barely aware of their surroundings.

Let me say this: I know a lot about head injuries. Going back 13 years ago, my son was shot in the head, received

traumatic head injuries, and he was left partially paralyzed. We were lucky. His mom was a nurse. She knew how to go through the system. He was also lucky that I had training in physical therapy. People understand, he was only 26 at that time, as many of our soldiers that are injured. They don't need just 3 hours of physical therapy a day; they need 4 in the morning, 4 in the afternoon, and then they need their families around them to take care of them in the evening time. It is hard. It is difficult work. But I know our young men and women are able to do this. The families need to be trained on how to work with their children that have head trauma.

But, again, it is up to us here in Congress, and I know there are hearings, but we must come up with answers on giving the treatment to these veterans with head injuries and to all our veterans that go through Walter Reed.

You cannot expect someone to go onto the campus and think that they are going to remember that they have an appointment the next day. You can't expect them to understand even sometimes where they are at that particular moment.

This has been treatment that we know how to give, and why we haven't given it to them I do not understand.

I know that Walter Reed is one of the best hospitals in the Nation, as long as you are in the hospital. But when you come out, that is where we are losing our veterans through the cracks. It is unacceptable, and we in Congress have a responsibility to make sure it doesn't happen.

During the Vietnam War, our military came home, and, unfortunately, we did not honor them the way they should have been honored. I thought we had learned our lesson.

The brave young men and women representing this country have done a wonderful job, and for us to even let down any kind of health care treatment for them is a black mark on this Congress and certainly on us, the United States of America.

I know the President has put a commission in place. I have been around here long enough to know, enough commissions. We need action. We can do it. That is what we are very good at, getting down to the bottom of it and putting in action. We can't have these veterans wait any longer.

Let me say this: Every day, Members of Congress get on the floor and say what a wonderful job our men and women are doing. Every day we honor them. And yet all of us have let them down. That is not acceptable. I hope that we will do better in the future. The future has to be now. The time has to be now. We cannot wait 2 to 3 to 4 months for a commission report.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. DREIER) is recognized for 5 minutes.

(Mr. DREIER addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Oregon (Mr. DEFAZIO) is recognized for 5 minutes.

(Mr. DEFAZIO addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BURTON) is recognized for 5 minutes.

(Mr. BURTON of Indiana addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from the District of Columbia (Ms. NORTON) is recognized for 5 minutes.

(Ms. NORTON addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Ms. GINNY BROWN-WAITE) is recognized for 5 minutes.

(Ms. GINNY BROWN-WAITE of Florida addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

THE COUNTDOWN CREW: COUNTDOWN TO THE TAX INCREASE BY THE DEMOCRATIC MAJORITY

The SPEAKER pro tempore. Under the Speaker's announced policy of January 18, 2007, the gentleman from Pennsylvania (Mr. SHUSTER) is recognized for 60 minutes as the designee of the minority leader.

Mr. SHUSTER. Mr. Speaker, we have come to the floor tonight again, my colleagues and I, to talk about something that is of great concern to us, great concern to the American people. And that is that, in just 1,398 days, there will be one of the largest tax increases in American history, over \$200 billion, and that is going to occur if the majority party does not extend the tax cuts that the Republicans put in place in 2001, 2003 and extended some of them in the last Congress.

But that is going to happen. This huge tax increase is going to occur in America. And the Democrats don't have to do anything but run out the clock. If they sit on their hands, sit on the ball, we will see, in 1,398 days, as I said, one of the largest tax increases that the American people will have ever experienced.

Some of my colleagues on the other side have talked about the change that took place in this body, and there was a change. But I don't know anybody in America, nobody that I talk to in the